



GRCC Laboratory Preschool

Family Handbook

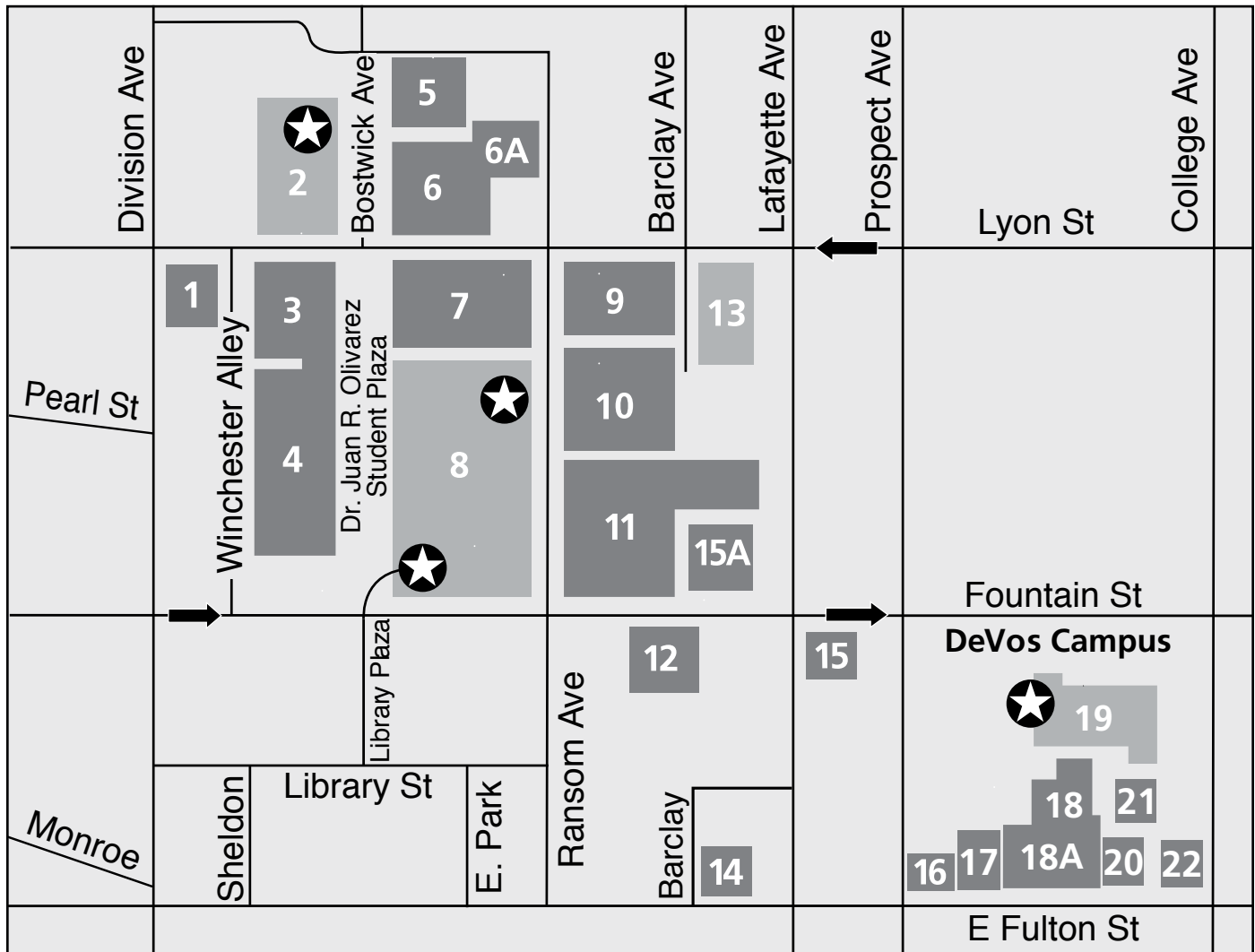
- General Policies
- Center Provisions
- Health and Safety
- Family Involvement
- Additional Information

GRCC LABORATORY PRESCHOOL

First United Methodist Church (See 15 in map below.)
227 East Fulton
Grand Rapids, MI 49503
Phone: (616) 234-4004

Hours of Operation:
Monday-Friday 6:30 a.m.–6 p.m.

GRCC MAIN DOWNTOWN AND DEVOS CAMPUS BUILDINGS AND PARKING



GRCC Main Downtown Campus

- 1. College Park Plaza
- 2. Lyon Parking Ramp (★)
- 3. Cook Academic Hall
- 4. Main Building
- 5. Calkins Science Center
- 6. Gerald R. Ford Fieldhouse
- 6A. Ford Natatorium
- 7. Student Center
- 8. Bostwick Parking Ramp (★)
- 9. Music Center
- 10. Learning Center
- 11. Wisner-Bottrall Applied Technology Center
- 12. Spectrum Theater
- 13. Under Construction

- 14. Preschool (First United Methodist Church)
- 14A. Preschool Playground
- 15. McCabe-Marlowe House

GRCC DeVos Campus

- 16. Administration Building
- 17. Stewart Edward White Hall
- 18. Sneden Hall
- 18A. Welcome Center
- 19. Sneden Hall Parking (★)
- 20. Mable Engle
- 21. Carriage House
- 22. Lettinga House

(★) Student/Visitor Parking

For locations of independently accessible building entrances, please call (616) 234-4140.

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WELCOME TO THE GRAND RAPIDS COMMUNITY COLLEGE LABORATORY PRESCHOOL

We would like to welcome all children and their families and are committed to making all of you feel a part of our “community.”

The Lab Preschool is a non-profit organization under the auspices of the Grand Rapids Community College, operating on the college’s academic calendar. An advisory board assists in matters of policy and programming. All family input is welcomed and appreciated. The program serves children six (6) weeks to six (6) years of age. Infants and toddlers attend on a full-time basis, while preschoolers attend a minimum of two (2) days per week.

The GRCC Lab Preschool is accredited through the National Association for the Education of Young Children (NAEYC). This accreditation holds the program to a high standard of excellence in child care. Please see “Additional Family Information” for further details about NAEYC Accreditation.

MISSION

The mission of the Grand Rapids Community College Laboratory Preschool is to provide opportunities for Early Childhood Education students to be involved with children under the guidance of instructors in a model early childhood program.

INFANT AND TODDLER PHILOSOPHY

The Infant and Toddler programs of Grand Rapids Community College Laboratory Preschool are based upon responsive, relationship-based care. Our philosophy supports respecting infants and toddlers as individuals. We believe that infant and toddler care should be based on supportive relationships and emphasize child-directed learning.

Infant and toddler staff tunes into each child, learning from the individual what he or she needs, thinks, and feels. In order to provide consistent care and to maximize the child’s learning experience, each staff member acts as a primary caregiver. Primary caregivers are assigned to individual children and support their social emotional development, communicate with families, arrange the physical space of the environment, and plan learning activities. This allows a strong, secure attachment to develop and helps the child gain a positive sense of self. As they observe the children in their care, staff reflects on and records information about their interests and skills in order to set the stage for the next learning encounter.

Infants and toddlers require equal measures of freedom and adult supervision as their self-help skills progress into autonomy. We trust in the child to be an initiator, an explorer, and a self-learner, and encourage their developing self-confidence, independence, and imagination. We provide an environment that ensures safety, offers appropriate developmental challenges, and promotes optimum health for children.



PRESCHOOL PHILOSOPHY

The philosophy of our program is based on the belief that children learn through their interaction with adults, other children, and the environment. Supportive interactions lead the child to a positive self-concept that will provide a sound basis for all subsequent learning. The program focuses on the development of the whole child. It is designed to enhance language, social, emotional, cognitive, physical, and creative growth of the child. We emphasize the importance of working cooperatively with families to achieve that goal.

The Child Development theories that guide the program are those of Jean Piaget, Erik Erikson and Project Approach. Piaget teaches us that children construct their knowledge of the world through their activities and interactions. Erikson describes the young child’s emotional development as the process of achieving a sense of trust, autonomy, and initiative. These too, are achieved through the child’s interactions and experiences. Project Approach builds on natural curiosity, enabling children to interact, question, connect, problem-solve, communicate, reflect, and more.

The program emphasizes developmental appropriateness by meeting children’s individual needs and using knowledge of normal child development. This appropriateness is expressed in the environment and the interactions in each classroom.

Activities are planned by teachers with children moving freely among learning center activities within each classroom. Some activities occur in a large group setting; however, most of the time is spent in small groups or individual activities chosen by the children. Both the schedule and the types of activities planned are designed to provide balance in the child’s day: active and/or quiet, large muscle and/or small muscle, individual and/or small group/large group, child-initiated and/or staff-initiated, and indoor and/or outdoor.

GOALS

1. To encourage the child to develop trust and a sense of security. To accomplish this, the child needs to know that those around him will help him meet all of his needs, both physically and emotionally.
2. To encourage children to recognize emotions and then later learn to express them appropriately. To foster the development of a positive self-concept and enable the child to feel successful and confident enough to initiate activities and interactions.
3. To stimulate sensory systems and enable infants and toddlers to use sensorial and perceptual skills to acquire knowledge about their world.
4. To promote growth of independence and a sense of competence through the development of self-help skills, problem-solving abilities, self-regulatory, and coping skills, fostering the child's growing sense of autonomy.
5. To encourage social development through opportunities to play cooperatively and practice problem-solving and negotiation skills.
6. To enhance fine motor abilities through the development of manipulative skills and hand/eye coordination. To enhance sensory motor and manipulative skills and increase the child's capacity to understand and manipulate the environment.
7. To develop gross motor skills in the area of body awareness, balance, loco-motor, laterality, coordination, and spatial awareness. To promote skills by encouraging conceptual and symbolic skills.
8. To promote cognitive skill development by providing interactions and materials that encourage constructing, refining, and expanding knowledge. To promote cognitive skills by responding to infants' non-verbal cues and encouraging toddlers' verbalization and language growth.
9. To develop speaking and listening skills in children through interactions with staff, other children, and materials.
10. To establish relationships between families and teachers, and between teachers and children, in order to provide consistent, loving care.

THE STAFF

The teachers/caregivers who make up the infant/toddler and preschool staff were chosen for their educational background in Child Development, their previous experience with young children and their responsiveness toward, understanding of, and skills in planning for your child(ren).

Minimally, assistants to the instructors have an associates degree in Child Development. All instructors have a BA in Child Development, or child/family-related degree. Some of our staff have a higher level degree, including MA degrees.

The director has a MA degree in Child Development or child and/or family-related degree.

All staff participates in regular professional development including all college in-services, annual retreat, biweekly staff meetings and weekly team meetings. Topics covered are decided each year but include family, child, curriculum, assessment, and community topics. In addition to all staff training, individual staff attend special workshops and conferences, based on their professional goals and

development plan. We are fortunate to experience very little turnover of our full-time staff.

As a part of the hiring process at GRCC, all staff members are required to have a criminal and child abuse background screenings. In addition, all staff are required by law to report all known and/or suspected incidences of child abuse and/or neglect to the proper authorities.

All full-time staff members are trained and certified annually through the American Red Cross in CPR and First Aid response. All staff are knowledgeable in administering first aid and will follow the "First Aid and Emergency Procedure" manual.

The staff will work to help your child develop emotionally, socially, physically, and intellectually. They will accomplish these goals by planning activities, providing interactions, and setting-up environments to meet each child's individual needs. Partnership with families is essential for the success of the program. You are the primary decision-maker in your child's life. Daily communication between families and staff is important to ensure consistency and continuity of care.

COLLEGE STUDENTS

Grand Rapids Community College Early Childhood Education students can be seen in all classrooms throughout the day. Prior to starting in a classroom, students have completed an orientation to the preschool including training on Child Abuse and Neglect, and have successfully completed criminal background and central registry checks through the Department of Human Services. Upon entering the building, students check in at the office. They must sign in each time they come to the preschool. All students will be wearing a GRCC Lab Preschool apron and GRCC ID. The students also follow a check-in procedure when arriving to the classroom. Students work in the classroom under adult supervision two to three hours one time per week. They are never left alone with the children.

Co-op students who are in their last semester of the Child Development program, work approximately 20-25 hours per week and are a part of the paid staff. These students are responsible for the supervision of children. Since they are a paid staff member, they could be left alone with children.

QUESTIONS, CONCERNS AND VISITS

We continue to strive to be the highest quality program for families and children. If you have any questions or concerns, please feel free to discuss it with classroom staff or the center director. Items can also be emailed to the director, if that strategy is easier. Concerns will be addressed individually between all involved. You are welcome to visit any area of the preschool at any time during our regular hours of operation, which are Monday through Friday, 6:30 a.m. to 6 p.m.

GENERAL POLICIES

HOURS OF OPERATION

1. The center is open from Monday through Friday, 6:30 a.m. to 6 p.m.
2. The center is closed on all college holidays. Calendars for the upcoming year are distributed as soon as possible.
3. The center operates on the same semester schedule as the college:
 - Fall (September through December)
 - Winter (January through April)
 - Spring (May and June)
 - Summer (July and August)

ENROLLMENT POLICIES

The program serves children between the ages of six (6) weeks to 29 months in the infant/toddler program and 2½ (30 months) to six (6) years in the preschool program.

Children need to feel secure to be able to develop trust. Infants and toddlers develop that sense of security by having consistent, primary care givers. In the infant and toddler rooms, children remain with the same teaching staff for a minimum of nine (9) months, preferably longer.

Vacancies in the program will be filled based on the application date, the child's age, and the level of availability each semester. If no space is available, you may be placed on a waiting list. You will be contacted when space becomes available.

To enroll a child in the Grand Rapids Community College Preschool program, you will need to obtain an enrollment packet from the center office. This packet will include:

- Health Appraisal Form and Immunization Record (to be signed by a physician)
- Emergency Card
- Tuition Billing Contract
- Child Care Food Program Application
- Field Trip and Photo Permissions
- Child History
- Licensing Notebook Notification

These items must be on file by your child's FIRST day of attendance. The center cannot provide care without them.

Children already enrolled in the center will have priority for the following year.

Children need to be successfully toileting to move into the two oldest preschool classrooms (Bear and Dino).

Special cases or questions about enrollment should be referred to the Director of the Lab Preschool.

Spring and Summer Enrollment

1. Spring (May/June) and Summer (July/August) enrollment forms will be available in late March and will be due by mid-April. A child already enrolled in the center will not be guaranteed placement, however a completed enrollment form and one week's tuition does.
2. To be guaranteed a spot for the fall semester, you must enroll your child in at least one of the summer sessions (May/June or July/August). If you do not enroll your child in a summer session, they will be moved to the waiting list for the fall semesters.

3. You will be charged for whichever session(s) you have chosen. Invoices for these sessions will continue to be billed on a monthly basis.
4. There are no early leave exceptions. You must continue to follow the Withdrawal Policy.
5. Infants or toddlers who have attended the spring session will be considered for a part-time space for the summer session on a first-come, first-served basis.

Check with the Lab Preschool Director for spring and summer rates and availability.

Change of Schedule or Withdrawal Policy

Families must notify the preschool in writing two weeks in advance of a schedule change or withdrawing your child. Families are responsible for paying the tuition amount for those two (2) weeks.

Please obtain a change of status/withdrawal form from the center office.

TUITION AND FEES

All tuition is to be paid per the terms stated on the invoice from GRCC Financial Services.

If tuition is a week or more late, non-payment is considered a basis for termination of your placement in the center.

Tuition payments are due on the fifteenth and by the end of the month. Payments will be considered late on the first of the month. A \$25 late fee will be charged if the balance is not received in full by the first of the month.

When your child is ill, tuition is still assessed to maintain your child's placement in the center.

Family vacations will be handled in the same manner as an illness absence (See Vacation Credit for additional information).

When the center is closed for holidays or inclement weather, no tuition will be charged.

Please refer to your billing contract for more information.

Registration Fee

1. There is a one time, non-refundable registration fee due to the preschool at the time of enrollment for all private pay accounts.
2. The registration fee is waived for all grant funded programs (Great Start Readiness Program (GSRP), CCAMPIS, GS/First Steps Scholarship and Occupational Support).
3. Families that have a time lapse in enrollment (i.e. spring or summer term) will need to repay the registration fee as well as the first week's tuition upon return. You will be considered a new enrollment.

Late Pick-Up Fee

A late fee will be applied for any child that is not picked up by 6 p.m. at a rate of \$10.00 for any part of each 10-minute increment. This payment is made to GRCC Lab Preschool and should be made at time of late pick up. This charge may also be added to your account. Non-payment is considered a basis for termination of placement in the center. If two children are picked up late from the same family, the fee is applied for each individual child.



Vacation Credit

When a child/family attends the preschool year round, a one week vacation credit will be given. This credit will be applied to your account on the August invoice. A child needs to have attended the preschool since January 1 of that program year to be eligible.

PICKING CHILDREN UP ON TIME

If by closing time, a child has not been picked up, the following steps will be taken:

1. Family(ies) will be called at all numbers listed on the Child Information Card.
2. If there is no response and staff is unable to reach the family(ies), all emergency phone numbers listed on the Child Information Form will be called. The child may be released to the individual(s) listed on the card.
3. A full-time staff member will remain with your child. If a full-time staff member is not present, the Preschool Director will be called.
4. When the director arrives to remain with your child, if the child has still not been picked up, or arrangements haven't been made to do so, the Grand Rapids Community College Police Department will be called to pick the child up. They will also assist in trying to locate the family(ies).
5. Staff will continue to try and reach the families (or other emergency contact) to make them aware of the situation. There will be a complaint file with Child Protective Services by the police. GRCC Police and Child Protective Services may make the decision to take the child to Kid's First at 2355 Knapp NE until the family arrives to pick up the child.

This is a stressful and difficult situation for a child, families, and staff alike. Please help us to avoid these types of situations by picking your child up on time. The preschool is to close promptly at 6 p.m. Please make sure to have your child picked up by or before this time..

Arrival

1. Please make sure to sign your child in upon arriving at the center.
2. Families are required to bring their child(ren) into the classroom, remove or assist the child in removing outdoor clothing, and discuss the child's needs with the teacher if necessary. Please allow enough time for this transition in the morning. The center does require that whoever is dropping off your child be a minimum of 18 years of age.
3. Families of infants need to fill out the top section of the daily activity record, noting such things as how long and how well the child has slept, bottles or other food the child has already had that morning, comments on the child's general state, and any other information that will help staff to better coordinate the transition from home to the center.

Departure

1. Please make sure to sign your child out prior to leaving the building.
2. Sufficient time should be allowed in the evening for families to talk with their child's teacher, as needed. For families of more than one child, please allow more time to pick up your children, as the staff is not required to stay any later than our closing time, 6 p.m.
3. Children will not be released to anyone but their family or legal guardians without prior written permission given to the teacher in charge. In the event that another person needs to pick up your child, please make sure that they are listed on the emergency card located in the office and that they come with a valid photo ID.

CHILD CUSTODY ISSUES

It is our goal to always advocate for children here at the Lab Preschool. In cases involving child custody, we need a copy of the current parenting time court order. We will support any decisions that have been determined by the court.

CHILD ABUSE AND NEGLECT POLICY

Grand Rapids Community College Laboratory Preschool is mandated by the Child Protection Law of Michigan to report to the Department of Human Services any suspected cases of abuse, neglect, child sexual abuse or sexual exploitation.

Any staff member that suspects the abuse/neglect of a child will immediately make a verbal report to Children's protective Services at 1 (855) 444-3911. Within 72 hours, a written report will be submitted to Children's Protective Services. This can be reported using form 3200 located on the Department's website.

IN-HOME CARE DISCLAIMER

Families and their children become comfortable with staff and they sometimes ask our staff and co-op students to provide after-hours, at-home childcare. Please be advised that the GRCC Laboratory Preschool at Grand Rapids Community College assumes no responsibility for employees who provide private services to families and that we are not permitted to refer possible baby sitters or child care. Families may contact Grand Rapids Community College Student Employment Services to post job openings for College students.

CHILD MANAGEMENT AND DISCIPLINE POLICY

Discipline means to teach, not to punish. During infancy, guidance involves meeting a baby's needs, responding to their cries and signals, and providing secure, warm care-giving. During both infancy and toddler-hood, the child learns from his/her environment. The center environment is designed to encourage positive experiences with caregivers, other children, and with toys/materials.

As infants grow into toddlers, they need limits set by adults. The guidance from adults will help the very young child begin to learn how to guide his/her own behavior. The staff will use positive methods of discipline which encourage self-control, self-direction, self-esteem, cooperation and a good sense of autonomy. The goal is to help children learn self-control that comes from within them and is based on a healthy self-concept. Corporal punishment, deprivation of food or rest, or any form of mental punishment will not be allowed.

GUIDELINES FOR CHILD MANAGEMENT

1. We use positive guidance. We state what we want the children to do, not what not to do.
 - Sit down when you slide." rather than "Don't stand when you slide."
 - "Turn the page carefully." rather than "Don't tear the book."
 - "Talk in a quiet voice." rather than "Don't shout."
2. We offer a choice only when we intend to give one. "Do you want to use red or green paint?" is a choice; "Do you want to have lunch?" is not.
3. We use words and a tone of voice that will help the child feel confident and reassured, not afraid, guilty, or ashamed.
4. Comparing one child, or his work, with another does not teach, but builds resentment and lowers self-esteem.
5. Redirection is often more effective than confrontation.
6. A touch of humor is worth a carload of admonitions.
7. Grabbing materials or toys while another child is using them is not allowed. The grabber is told (sometimes over and over again), "He is using it right now, you may have it when he is through." Finding another comparable toy so they can play together is a social learning process. There is a difference in the behavioral expectations between the groups of children: the younger children are helped to stand up for their own rights, the older children learn to make decisions and solve problems for themselves.
8. We teach children to stand up for their rights. Having the child who has been hit say to the hitter, "I don't like it when you hit me," takes a lot of repetition and patience but it does teach the child that he can take care of himself. We make sure the aggressor understands and acknowledges the child he has hit.
9. When limits are necessary, they are clearly defined and consistently maintained by everyone who works at the center. Limits and goals are posted in every area.
10. We avoid words like good, bad, nice, naughty, and big. Instead of saying, "that was a good boy!" we say, "you put the blocks on the shelf; thanks for helping!" We acknowledge the act, not the child and disapprove of the act, not the child.

BITING POLICY

Biting is a developmental stage that many children naturally go through between nine (9) months and three years of age. The safety of children is our primary concern. However, we understand most biting is a form of communication. Toddlers have emerging verbal skills are often impulsive without a lot of self-control. Sometimes biting happens for no known reason. The teachers will encourage children "to use their words" when upset. Also, they will help children with the words they may need to describe their frustrations. Most importantly the staff will strive to shadow a child as closely as they can when biting is a concern.

If a child is bitten, the child who was bitten will be immediately cared for and shown concern. The child who did the biting will be acknowledged with a "No-we don't bite." The child who is bitten will continue to be comforted. The child who was the biter will be removed from the situation and be given something to satisfy them such as a teether or other item. The teachers will stay calm. The bite will be assessed and cleansed with soap and water. The families of both children will be notified of the biting incident. The incident report will be completed. Confidentiality of all children involved will be maintained.

Staff in the classroom will work closely to develop a plan for the child who is biting. This is developed with the assistance of the family. This often will include tracking the biting in a journal with details such as day, time of day, whom they are playing with, what area they are playing in etc. This information can assist the staff with what their strategies might be in the classroom.

CURRICULUM

The preschool curriculum is planned and implemented with the purpose of encouraging each child's optimal, individual development.

The teacher's role in the preschool curriculum is to arrange the environment with activities and materials planned for each of the following permanent learning centers:

- Large motor
- Art
- Manipulatives
- Language (books/puppets/flannel board)
- Science
- Dramatic Play
- Math
- Blocks
- Outdoor Play
- Water, Sand and/or Texture Play

1. Facilitate and expand children's play in areas so that each child's learning is encouraged in a way appropriate to his/her developmental ability.
2. Observe each child's individual growth and interest and incorporate that knowledge into the curriculum planning.
3. Interact closely and supportively with children building relationships that support growth.
4. Assessment of preschool children through the guidance of Teaching Strategies, a system of checklists, summary reports, and portfolios. Pre-screening and assessment through Teaching Strategies Gold, a system of observations, individual profiles, summary reports, and portfolios.



The preschool curriculum is implemented using the tenets of The Project Approach, State Standards for Early Childhood, and the Classroom Literacy Enrichment Model as a guide. The projects are of varying length and subject matter. The classroom teachers and children decide which topics are of interest throughout the year.

Using their knowledge of the sequential nature of learning, the teachers help children build their knowledge and skills in each of the developmental domains through the ongoing activity of the children. Each teacher plans to meet the developmental abilities of the group, and of specific individuals.

The skills included in our curriculum planning include:

1. Physical Development
 - Large motor—running, jumping, climbing, balancing, throwing/catching, coordination, and spatial awareness
 - Small motor—hand/eye coordination, cutting, marking, building, and other manipulative skills
2. Social Skills
 - Sharing, turn-taking, negotiating, beginning co-operative play, and problem-solving
 - Increasing understanding of others' feelings and needs
 - Understanding and appreciation of differences in peoples' families, physical appearance, and culture
3. Self Esteem
 - Self-help skills of dressing, toileting, cleaning, and classroom 'jobs'
 - Problem-solving, assertiveness, taking initiative, and expressing feelings appropriately
 - Sense of confidence in own competence as a player and learner
 - Sense of how special each child is and creating a self-worth
 - Accepting, valuing, and learning to care for their body
4. Attention Span
 - Increased ability to become and remain involved in play situations and activities of the child's choosing in both individual and small group settings
 - Increasing ability to attend and participate in other initiated (adult or child) activities in small or large groups (i.e. stories, discussions, 'show and tell')
5. Speaking and Listening Skills
 - Expression of verbal thoughts and feelings, conversation, speaking in a group, verbal problem-solving, and listening to others individually or in group settings
6. Cognitive Skills
 - Constructing, refining, and expanding knowledge through

increasing skills in observing, exploring, questioning, and problem-solving. These skills are built through active play with materials, through experiences in the classroom and the outside world, as well as through interactions with adults and other children

- Building logical and mathematical knowledge through ordering, comparing, matching, sorting, and seriating materials
7. Creativity
- Expressing creativity in art, music, movement, creative dramatics, and language

TECHNOLOGY

Technology use in our program is connected to developing relationships, communication and social interaction. It is embedded into our daily routines and is used within the context of supporting responsive child-to-child relationships. Our play-based foundations require that technology is developmentally appropriate and used with intention as part of our holistic curriculum. Research shows that interactive media has the potential to enhance social interactions, creative play and exploration. Technology and interactive media expands children's access to new content and skills and is viewed as a resource to accelerate learning.

Technology use reflects degrees of interactivity, active engagement/empowerment, child choice and control, while ensuring that children learn the skills they need for technological literacy. The focus is on exploration itself, not on the technology. Children are supported in learning to think critically about the media they use. Use of technology provides adaptations for special needs individuals and is culturally and linguistically appropriate.

Staff is supported through time and training, enabling them to learn new technologies in order to enhance children's learning. Technology used by children in the program is continually monitored and supervised by staff.

CULTURAL COMPETENCE IN THE CLASSROOMS

We are guided by NAEYC Principles as professionals in our classrooms. We support the four guiding principles; Teacher Reflection, Intentional Decision-making and Practice, Strength Based Perspective and Open Ongoing Two-Way Communication.

TEACHER REFLECTION

Teacher Reflection on our practice including our own individual values and beliefs is integral to creating partnerships with our families and children. We understand and support that children's learning is influenced by their cultural and linguistic background.

INTENTIONAL DECISION-MAKING AND PRACTICE

Children are "nested" in families. Families are the first and most influential teacher of their children. In recognition of this, families are actively engaged in setting goals for their child. Resources are available to build relationships such as translation or interpretative support whenever possible.

The reciprocal nature of the relationship is the center of our focus. Families sharing specific information on their culture is encouraged through daily conversations, background forms/surveys and featuring families in weekly documentation. Classrooms include materials that reflect the families enrolled.

STRENGTH-BASED PERSPECTIVE

Families' strengths are embraced in each classroom and throughout the program. Accepting of differences and working towards understanding continues to be our first goal when dealing with families and children. Children's strengths heavily influence curriculum and program planning.

OPEN, ONGOING TWO-WAY COMMUNICATION

Families are part of a partnership with the program and specifically each teacher and classroom are supported by open ongoing two way communication. Daily conversations with families during drop-off and pick up are excellent opportunities to create open two-way communication. However, we use several other effective methods. Phone calls throughout the week sharing positive experiences and health updates, documentation throughout the classroom on children's experiences, emails, journals, home visits, family teacher conferences, room events, program events and program documentation are examples of ways we connect with families.

THE CENTER PROVIDES

For Infants:

- **Similac® formula** (with iron) for infants up to one year of age, that comes in factory-sealed containers, prepared according to the manufacturer's instructions
- **Food for breakfast, lunch, and snack** including baby foods and cereals from factory-sealed containers, prepared according to the manufacturer's instructions
- **Crib for naps**

For Toddlers and Preschoolers:

- **Milk** as required by the Child Care Food Program
- **Food for breakfast, lunch, and snack**
- **Bedding for naps** on a cot with a sheet and light blanket
- **Wipes, toothbrushes, and toothpaste**

SCREENING AND ASSESSMENT

INFANT AND TODDLER ROOMS

The Infant and Toddler Rooms use Ages and Stages as a prescreening instrument within the child's first month of attendance or re-admittance into the classroom. It is used to determine if there are immediate concerns that require follow-up, referral or other intervention. The screening tool is used as a link to follow-up, if necessary, but not as a means to a diagnosis or label.

If the child may be in need of further developmental screening or referral for diagnostic assessment, the families will be notified in writing by the classroom teacher(s) and a family/teacher conference will be scheduled to discuss findings and make recommendations.



All children in both the Infant and Toddler classrooms are assessed using Teaching Strategies (TS) Gold. Children are assessed on a consistent basis using these reliable, appropriate and valid assessments. The assessments allow the teacher(s) to assess each child's strengths, progress, and individual needs during daily activities and routine care giving.

Using anecdotal records, primary caregivers observe and document development in an individual child portfolio, in the following domains: physical, language, cognitive and social an/or emotional.

The purpose of these assessments are to aid in making decisions about individual children's teaching and learning, identify concerns that may require intervention and assist in improving the developmental program and interventions. An individual weekly lesson plan is prepared using the anecdotal notes taken. During the family/teacher conferences, a summary of this information is shared with families, who are encouraged to provide feedback and suggestions for further planning and assessment for their child.

All of the Infant/Toddler staff has received training in the use of and interpretation of results of Ages and Stages, TS Gold and child portfolios. All individual child records are kept in separate files in a filing cabinet. Only staff has access to this personal information.

The classroom teachers will provide you with additional information about the center's screening and assessment methods via postcards, newsletters and during family/teacher conferences.

PRESCHOOL ROOMS

The older preschool rooms use the Brigance Early Inventory. The younger preschool room uses Ages and Stages as their prescreening inventory within the first month of attendance or admittance into the classroom. They are used to determine if there are other immediate concerns that require follow up referral or other interventions. These screening tools are used as a link to follow up, if necessary, but not as a means to diagnose or label.

All preschool children are assessed using Teaching Strategies Gold. This assessment system assesses and documents children's skills, knowledge and accomplishments across multiple objectives. This assessment is ongoing and embedded throughout the curriculum.

The objectives for development and learning include: Social-emotional, Physical, Language, Cognitive, Literacy, Mathematics, Science and Technology, Social Studies, The Arts and English Language Acquisition.

The portfolios are collections of children's work, family involvement and classroom experiences.

Our goal is to use ongoing anecdotal records gathered to assist us in weekly lesson planning including small group activities.

All preschool staff has received training in the use of and interpretation of results from Teaching Strategies Gold. Each child has a file located in the classroom filing cabinet. Only staff has access to this personal information.

During Family/Teacher conferences, which are offered formally twice a year, staff will partner with families on goal setting based on data.

NUTRITION

INFANT NUTRITION

The center supports breast-feeding and will work with families to coordinate with feeding schedules and provide a comfortable place to breast-feed at the center if you choose to do so.

Breast milk must be brought to the center in ready-to-feed sanitary containers labeled with the child's name and date. Caregivers are able to store the milk for up to 48 hours (24 hours if it was previously frozen). Staff can also freeze up to a three week supply, due to limited space and risk of loss. Staff will be sure to gently swirl, not shake, the milk before feeding to ensure its highest nutritional components are preserved.

Cow's milk will not be fed to infants younger than one year of age without written permission from a doctor.

Staff do not offer solid foods and fruit juices to infants younger than six months unless

TODDLER AND PRESCHOOL NUTRITION

All meals and snacks are planned and prepared by the staff trained in the area of menu planning and food preparation in accordance with the USDA Child and Adult Care Food Program guidelines. All meals will meet or exceed the requirements of the Michigan Childcare Food Program. The GRCC Lab Preschool has a dietician available to review menus and provide general consultation about nutrition, allergy and other dietary related questions. Nutritional guidelines require that children under the age of two be served whole milk. We must have written permission from your child's physician to serve any other milk or food substitution.

The menus will be planned quarterly and dated as to week of use. The current week's menu will be posted on the Family Bulletin Board in the hallway outside of the Infant and Toddler room and on the bulletin board in the Preschool hallway. Menus are also posted in each classroom. All substitutions will be noted on menus, and after use, they will be kept on file for three years for audit purposes. Copies of the menus are available upon request.

The center will provide breakfast for all children in attendance at the time of service. Lunch will be served daily. A mid-afternoon snack will also be served to all children in attendance.

The following is a list of foods that will not be offered to children under the age of four years: hot dogs, grapes, nuts, popcorn, raw peas, hard pretzels, spoonful's of peanut butter or chunks of raw carrots. We only service 100% juice at the center and infants are limited to no more than four ounces per child daily.

The center is peanut and nut free.

All food/beverages brought into the center for your child are to be labeled with your child's name and date.

Special Occasions Celebrations

We respect the fact that families often have different traditions and holiday celebrations. We strongly encourage families to come into the classroom and share their celebrations. Holidays in general can be over-stimulating for young children. We are aware of children's excitement surrounding celebrations. We acknowledge and engage in group discussion of their individual experiences without emphasizing holidays in the curriculum. Minimizing stress for families and children often associated with the holidays is our focus.

Food in the Classroom Guidelines

To be responsive to children who have food allergies or other dietary restrictions, each room will have a list of foods that all children can eat specific to that classroom. Only foods will be allowed that all children can eat. Pre-packaged foods that are commercially prepared by a licensed food vendor need to include a list of all ingredients. Commercially prepared packaged foods must be in factory sealed containers with the label. Peanut/tree nut products or items processed in facilities that process peanuts will not be allowed. Food may not include suckers, candy or any other food that may be a choking hazard. Please read the food labels carefully before bringing in a treat. Homemade treats are not allowed. Fruit must be brought in whole and staff will cut it for the class.

REST AND ACTIVITIES

NAPPING

Children are provided a rest/nap time if they spend more than four hours in care here at the center. Each child will have his/her own cot or crib. The center will provide sheets and blankets which will be laundered weekly and when visibly soiled. Cribs will be cleaned weekly or before use by another child. Infants, unless ordered by a physician, are placed on their backs to sleep and can assume any sleep position when they can do so themselves.

OUTDOOR PLAY

Time outdoors will be provided for all children daily. According to licensing, children must remain indoors if it is raining, the temperature (including wind chill) is 10 degrees or below, or the temperature (including the heat index) is above 90 degrees Fahrenheit.

The center's playground is located behind the GRCC Applied Technology Center off of Fountain Street. The playground is divided into a toddler area and a preschool area.

The center must have written permission from the families at the time of enrollment to take children on walks off the premises of the center. Children are not allowed to be left



behind for any reason.

Appropriate clothing for outdoor play must be provided by the families. During the winter, this would include a coat, snow pants, boots, hat and mittens.

Appropriate shoes will have a back (such as a tennis shoe) or minimally a sandal with a back strap. This is for your child's safety while climbing, running, and walking. When necessary, staff may have your child wear school shoes to ensure their safety.

Infants and toddlers are taken for walks in the "bye-bye buggy" or strollers daily either downtown or to the playground.

FIELD TRIPS AND TRANSPORTATION

Walking field trips are plentiful due to our location. When leaving the grounds of the GRCC Lab Preschool classroom, staff record in the office journal where they will be going and what staff member's cell phone to call in case of an emergency. Field trip details are shared with families through written communication at least three (3) days in advance, generally a week in advance. If classrooms are out in the late afternoon, they will return to the center by 5 p.m. for departures/pickup.

The city bus is also available for field trips. A release form is to be signed at the time of enrollment to give permission for your child to ride on the city bus. It is kept in your child's file in the office.

Field trips are an important part of the preschool experience and are enjoyable for both staff and children. Staff will plan, communicate, and watch safely to make these trips great learning experiences for everyone. Documentation will be done to share the experience with families.

FAMILIES MUST PROVIDE

1. An appropriate milk substitute if you chose not to use those provided. This could be soy, rice, organic, etc. (Almond and coconut milk are not allowed as we are a nut free facility). For infants less than one year old, an alternate formula (Isomil, Enfamil, etc.) or breast milk is required. This needs to be labeled with your child's name and the date.
2. At least two complete changes of clothing. All items should be clearly labeled with the child's name and placed in the child's cubby or room storage drawers.
3. A favorite stuffed toy or blanket for your child's nap, if

needed. However, per licensing, infants may not have a soft object, bumper pad, stuffed toys, blankets, quilts, or comforters in the crib with them.

4. Infants and toddlers will need a full week's supply of diapers, as staff check diapers every hour. If you have been notified two or more times regarding your child's diaper supply, we will contact you to bring diapers in that day, or your child will have to go home.

WHAT TO LEAVE HOME

Generally speaking, center staff feel that toys from home should stay at home. This includes all toys that have weapons or other violent themes. Please check with your child's teacher, as each room's guidelines may vary slightly.

HEALTH AND SAFETY

Health, safety, and nutrition are primary concerns at the Lab Preschool. We will maintain good sanitation practices such as hand washing, maintaining individual cots/cribs with clean bedding, disinfecting furniture and toys, and closely monitoring each child's state of health. Food and feeding utensils will be stored, handled, and used in a sanitary manner.

The environment is set up for young children to explore. Appropriate play materials and constant close supervision will assure safety. Shoe covers or only shoes worn in the infant room are used to prevent foreign material from entering the room and contaminating the floors and main play space for infants.

Conversation between teachers and families every morning and evening will help maintain the consistency necessary for health development. Two-way communication about the child's health and well-being will do much to reduce illness in the center.

HEALTH CARE PROFESSIONAL

The program has and implements a written agreement with a health consultant who is either a licensed pediatric health professional or a health professional with specific training in health consultation for early childhood programs.

- The health consultant visits at least two times a year and as needed.
- The health consultant observes program practices and reviews and makes recommendations about the program's practices and written health policies to ensure health promotion and prevention of infection and injury. The consultation addresses physical, social/emotional, nutritional, and oral health, and exclusion of ill children.

The program documents compliance and implements corrections according to the recommendations of the consultant.

PHYSICAL EXAMINATION AND IMMUNIZATION

Licensing requires that all children enrolled in the GRCC Lab Preschool have a complete health evaluation and immunization record within the past 12 months. This form is provided in your enrollment packet and due before your child may attend the center. Families will be notified in advance when their child's physical is about to expire and are therefore responsible to get it updated by the date required. Infants

and toddlers will need updated physicals every year and children in the preschool program will need a physical every two years. Any restrictions of activities or allergies should be stated in writing by a licensed physician. The center must also be informed of the date of subsequent immunizations.

MEDICAL EMERGENCIES

All children must have the Child Information Card on file providing current information.

If a medical emergency should arise and the family cannot be reached, the center may take such temporary action as deemed appropriate.

Emergency Card

The emergency card provides center staff with information regarding how to get in contact with you, whom to contact in the event that you cannot be reached, and whom staff are authorized to release your child to. Emergency cards must be completed, signed, and on file before your child may attend. Information must be accurate and updated periodically as needed.

A class schedule must be provided by families who are students at GRCC. Campus Police will notify families in their classroom if their child is ill or injured.

Individual Emergency Care Plans

If your child has a known medical or developmental condition that might require special care in an emergency, please inform your child's teacher. He/she will provide you with a form to complete, which provides them with your child's emergency care plan to keep on file.

If your child has allergies or asthma, an "Allergy Action Plan" or an "Asthma Action Plan" must be provided by your child's doctor. This plan must be on file at the center no later than two weeks after the child's start date or enrollment will be suspended until this is received. This is for the safety of the child and the protection of staff.

Staff Procedures for Emergencies

The classroom teachers will be responsible for reporting to the family immediately upon observation any changes in the child's health and/or any accidents which may have happened to the child. An incident of inappropriate touching will be communicated to families the same day. If requested, a conference will be planned with the families, staff, and director to address questions or concerns around any emergency situation. Any staff members involved in or who observed an accident, and incident of inappropriate touch, or lost/missing child will complete all appropriate forms.

MEDICAL CONDITIONS

Communicable Diseases

A notice will be posted in your child's classroom if your child or another child contacts any unusual communicable disease. The posting will provide the following information:

1. Type of disease
2. Signs and symptoms of the disease
3. Mode of transmission
4. Period of communicability
5. Control measures being taken in the classroom/school
6. Control measures that families can implement at home

A staff member annually attends the Kent County Health Department training to stay current on health and disease related information. Staff also obtains advice via email or phone from the health department and online resources as needed.

There is a list of common infections in child care in the Additional Family Information section of this book for your reference.

Illness

In an effort to keep down the incidence of disease and illness, and for the comfort of the children, families are expected to keep their child home in the event of any of the following symptoms:

- Fever (100.6°F or higher)
- Vomiting
- Diarrhea
- Rash/Blisters
- Swelling/Redness of throat
- Runny/Red eyes
- One-on-one comforting
- Lack of participation

Should your child become ill or exhibit any of these symptoms while at the center, you will be contacted and expected to make arrangements for your child to be picked up immediately. If staff is unable to reach you, others on the emergency card will be contacted. When possible, your child will be isolated from the other children in the classroom and cared for by a familiar care giver. Your child will be kept away from new individuals until you or your designee comes to pick them up.

Children may return to the center when:

1. The child's temperature has been below 100.6 degrees Fahrenheit for 24 hours without fever-reducing medications.
2. The child has been diagnosed as having a bacterial infection and has been on antibiotics for 24 hours.
3. It has been 24 hours since the last episode of vomiting or diarrhea without medication.
4. The nasal discharge is not thick, yellow, or green.
5. Eyes are no longer discharging, or the condition has been treated with an antibiotic for 24 hours.
6. The rash/blisters have subsided or the physician has determined that the rash/blisters are not contagious.

Occasionally, a written note from the child's physician will be required by the center for a child to be re-admitted. Please call the center to let staff know if your child will not be in attendance on a scheduled day. When a child is too ill to remain in the classroom, they will be cared for in the office area until they can be picked up.

Alternate Child Care Arrangements

Sooner or later, all children get sick. This causes changes in plans and expectations, and makes life complicated, especially for working families. The best way to be prepared for these unavoidable sick days is to plan ahead.

- Think ahead of time what your choices will be.
- If you work during the day, find out about your employer's sick leave policies.
- If it is difficult for you to take time away from work, find an alternate caregiver. This might be a relative, neighbor, friend, or other dependable adult that you can call when your child is too sick to be at the center.

Allergies

We are a nut and peanut-free program due to many children's, family's and college student's allergies to peanut and/or nut products.

If your child has any specific allergies, please provide the room staff with an "Allergy Action Plan" from your child's doctor and meet with staff to discuss the plan. This will assist the staff in case of an emergency.

Some children may have intolerances to milk or food and require food substitutions. A food substitution form is available and should be filled out by the child's doctor and returned to the room. Families will provide an alternative food for the child.

If a food is listed as an allergy on any documentation provided by the family, the center will not serve that food to a child even if the family states they do so at home.

All allergies are posted in the classroom with the child's picture notifying all who work in the classroom of specific child(ren)'s allergies. This information is also posted in the office and the kitchen.

MEDICATION GUIDELINES

Staff will provide families or legal guardians with the appropriate written permission form to administer prescription and non-prescription medications. In addition to written permission, the following is needed for:

Prescription Medications

Prescription medications must have the pharmacy label indicating:

- Physician's Name
- Child's First and Last Name
- Name and Strength of Medication
- Dosage Amount
- Frequency
- Medication will only be given in accordance with those instructions

The form must be signed on a monthly basis.

Non-Prescription Medications

The center **MUST** have a current doctor's slip on file to administer over-the-counter (non-prescription) medication to a child under the age of two (2) years. This also applies to older children when dosage information is not included on the medication bottle for their age. The doctor's slip needs to include the following information:

- Medication Name/Brand
- Dosage Amount
- How often it can be given
- Symptoms
- Doctor's Signature

The doctor's slip will be considered current for three months from the date of issue.

Special Medical Procedures

If your child is in need of a special medical procedure(s) while in attendance, please contact your child's classroom teacher(s) to review the health care provider's written instructions. We will work in cooperation with you and your child to best meet the needs of the child. We appreciate your support in following our necessary policies and procedures with medication.

HYGIENE

Hand-Washing

The program follows these practices regarding hand-washing:

- Staff members and those children who are developmentally able to learn personal hygiene are taught hand-washing procedures and are periodically monitored.
- Hand-washing is required by all staff, volunteers, and families when hand-washing would reduce the risk of transmission of infectious diseases to themselves or others.
- Child washes either independently or with staff assistance as needed.

Children and adults wash their hands:

- On arrival for the day
- After diapering or using the toilet
- After handling body fluids (e.g. blowing or wiping a nose, coughing on a hand, or touching any blood, mucus, or vomit)
- Before meals and snack, before preparing or serving food, or after handling any raw food that requires cooking (e.g. meat, eggs, poultry)
- After playing in water that is shared by two or more people
- After handling pets and other animals or any materials such as sand, dirt, or surfaces that might be contaminated by contact with animals
- When moving from one group to another that involves contact with infants and toddlers/twos.

Adults also wash their hands:

- Before and after feeding a child
- Before and after administering medication
- After assisting a child with toileting
- After handling garbage or cleaning

Proper hand-washing procedures are followed by adults and children and include:

- Using liquid soap and running water
- Rubbing hands vigorously for at least 10 seconds, including back of the hands, wrists, between fingers, under and around any jewelry, and under finger nails; rinsing well, drying hands with a paper towel, a single-use towel, or dryer; and avoiding touching the faucet with just-washed hands (e.g. by using a paper towel to turn off water).

Toileting and Diapering

1. Diapering shall occur in a designated diapering area and shall include all of the following:
 - Physically separated from food preparation and food service
 - Within close proximity to a hand-washing sink that is used exclusively for this purpose
 - Have non-absorbent smooth, easily sanitized surfaces in good repair and maintained in a safe and sanitary manner
 - Of sturdy construction with railings or barriers to prevent falls
 - At an adult work surface height to minimize children's access
 - Have diapering supplies within easy reach

- Have a plastic-lined, tightly covered container exclusively for disposable diapers and diapering supplies that shall be emptied and sanitized at the end of each day
 - Cleaned and sanitized after each use
2. Only single use disposable wipes or other single use cleaning cloths shall be used to clean a child during the diapering or toileting process.
 3. The caregiver shall frequently check diapers/training pants and change diapers or training pants that are wet or soiled.
 4. Toddlers in wet diapers or training pants may be changed in a bathroom.
 5. Diapering shall not be done on any sleep surface.
 6. The caregiver shall thoroughly wash his or her hands after each diapering and after cleaning up bodily fluids.
 7. Guidelines for diapering and hand washing shall be posted in diapering areas.
 8. Disposable gloves, if used for diapering, shall only be used once for a specific child and be removed and disposed of in a safe and sanitary manner immediately after each diaper change.
 9. Diapers shall be disposable or from a commercial diaper service. If a child's health condition necessitates that disposable diapers or diapers from a commercial service cannot be used, then an alternative arrangement may be made according to the child's family or licensed health care provider.
 10. The following shall apply when cloth diapers or training pants are used:
 - No rinsing of the contents shall occur at the center.
 - There shall be a waterproof outer covering that shall not be reused until thoroughly washed and sanitized.
 11. Toilet learning/training shall be planned cooperatively between the child's primary caregiver and the family so that the toilet routine established is consistent between the center and the child's home.
 12. Equipment used for toilet learning/training shall be provided. Adult-sized toilets with safe and easily cleaned modified toilet seats and step aids or child-sized toilets shall be used.
 13. Non-flushing toilets (potty chairs) may be used under the following conditions:
 - Easily cleaned and sanitized.
 - Used only in a bathroom area.
 - Used over a surface that is impervious to moisture.
 - Cleaned and sanitized after each use.



CRISIS PLAN AND DISASTER PREPAREDNESS

The Laboratory Preschool is directly involved with the Grand Rapids Community College Crisis Response Team. This team has developed Emergency Procedures for Bomb Threats, Suspicious Persons, Power Failure, Injury/Illness, Fire, Gas Leak, Storm Warning and Robbery. We work closely with the GRCC Police Department. In fact, they often visit our building to check in on us. Preschool employees have had Active Shooter Training provided by the GRCC Campus Police.

Family Notification-Families will be notified if the building is evacuated, in the case of a lost child, an unsupervised child and alleged sexual contact.

How families will be reunited in case of a crisis-whenver possible a sign will be posted on the doors at the Center and information will be available on the Preschool voice-mail. Check the GRCC website (grcc.edu) and sign up for text alert messages at cms.grcc.edu/text messages.

If you would like to see our Crisis Response documents, please stop in the office to request a copy. Your child(ren)'s health and safety is our first goal. We take this responsibility very seriously.

INCLEMENT WEATHER

Campus Closing Due to Inclement Weather and Emergency Conditions Policy:

It is the policy of Grand Rapids Community College to maintain normal operations on all regularly scheduled days; therefore, the College rarely closes because of inclement weather conditions.

If and when the College does close due to inclement weather, all buildings will be closed. In the event of non-weather related issue impacting campus safety and security such as power outages, mechanical failures, etc., the College may need to temporarily close some or all of the campus.

Any closings will be posted on grcc.edu, local television stations including Wood TV8, WZZM 13 and Fox 17 by 6 a.m. The GRCC Laboratory Preschool is part of the Main Campus and/or GRCC Kent County posting. It will not specifically note that GRCC Laboratory Preschool is closed.

In the event that the college implements a delayed start the Lab Preschool will open for families at 10 a.m.

If the college is closed for the entire day due to weather or other issues impacting campus safety and security, no tuition will be charged for that day. If the college is delayed starting, regular tuition for the day will be charged.

Although the college rarely closes we wanted to be certain families understood the current policy. As always we appreciate your support. If you have any questions please do not hesitate to stop in the office.

FIRE AND TORNADO DRILLS

Fire drills are done monthly. This practice prepares the children for an actual emergency. We stress the importance of moving quickly outdoors and across the parking lot. In the event of an actual emergency and poor weather conditions, the children will be lead across the street to First Place.

Tornado drills are completed monthly April through October. If the US weather bureau issues a tornado warning while school is in session, the children will be taken to the church dining room in the basement by staff members on duty. Families may pick their children up from that area if they choose to do so.

BUILDING SECURITY AND SAFETY

It is the responsibility of every staff person to be constantly aware of the safety of the children. Individuals entering the church either check-in with church personnel or Lab Preschool staff before proceeding further into the building. Students and volunteers in the classroom must sign in each time they come to the Preschool. Each classroom has a check-in procedure and classroom doors can be locked from the inside if needed for further safety measures.

Whenever classrooms are painted, carpeted, tiled or otherwise renovated, they are ventilated before they are used by children and adults. The preschool has a security door to enter the area where the children are. A key pass is needed to get through the security door. All families are provided key cards upon entrance to the program. If lost, a \$5.00 replacement fee will be charged.

TOBACCO FREE POLICY

The Grand Rapids Community College campus is tobacco free. "No Smoking/Smoke Free" signs are posted at our facility and near outdoor play areas to communicate that no smoking is permitted in the presence of the children.

PEST MANAGEMENT

The GRCC Lab Preschool will provide notice annually of their pest control policy and regulation that includes the posting and notice requirements for pesticide application. Applications over school breaks will not require family notification. Written notification will be sent home with children and signs will be posted for a planned pesticide application 48 hours in advance. This notice will contain information about the pesticide, including the target pest or purpose, approximate location, date of the application, contact information at the center, and a toll free number for a pesticide information center recognized by the Michigan Department of Agriculture. Liquid spray or aerosol insecticide applications may not be performed in a room in the center unless the room will be unoccupied by children for four (4) hours or longer if required by the pesticide use directions. The church building manager will inform the director who will inform families.

CLASSROOM PETS AND ANIMAL VISITS

Teaching staff will make sure that pets are in good health and are suitable for contact with children. Teaching staff will supervise all interactions between children and animals and provide instruction on safe behavior. Children with animal-specific allergies will not be exposed to those animals. Reptiles are not allowed as classroom pets.



If a visiting animal should require immunizations, documentation shall be provided from a veterinarian or animal shelter.

FAMILY INVOLVEMENT

The staff at the GRCC Lab Preschool is a team with you and your child. Although many families are working and going to school, you are encouraged to visit the preschool during regular operating hours whenever possible.

The staff is willing to answer any questions that you may have, but please try to avoid times when they are actively involved with the children. Individual appointments with your child's teacher(s) may be made by scheduling them with the teacher in advance.

FAMILY ADVISORY BOARD

The center utilizes a Family Advisory Committee for advice on policy and selection and feedback of family events. This is done through meetings and surveys. If you are interested in being engaged in this work, please notify the office. You are needed, even if you can only give a small portion of your time. Family input makes for a better center.

FAMILY EVENTS

Events will be offered several times throughout the year to give an opportunity for families and staff to get to know each other better. Programs are offered at various times of the day to try to reach all families. There is an annual summer picnic, fall festival, and a winter breakfast for families to attend. Families on the Advisory Board are asked to help plan and organize these events. Notification of events and meetings will be given well in advance.

FAMILY AND/OR TEACHER CONFERENCES

Conferences with your child's teacher(s) are scheduled twice a year: once in the fall and once in the spring. At these conferences, you will receive written and verbal communication about your child's development. Additionally, similar written and verbal information will be provided to you by your child's teacher(s) on a regular basis.

If your child should have a serious challenging behavior, the teacher(s) will work with you as a team to develop an individual plan to support the child's inclusion and success in the classroom.

If you have any particular concerns, you are welcome to schedule an additional conference by contacting your child's teacher(s) directly. Please allow enough notification of these appointments so that necessary arrangements can be made to free the teacher(s) from the classroom at the appointment time.

ADDITIONAL INFORMATION AND RESOURCES FOR FAMILIES

ACCREDITATION

The National Association for the Education of Young Children (NAEYC) is dedicated to improving the well-being of all young children, with particular focus on the quality of educational and developmental services for all children from birth through age eight (8). NAEYC is committed to becoming an increasingly high performing and inclusive organization.

Founded in 1926, NAEYC is the world's largest organization working on behalf of young children with nearly 90,000 members, a national network of over 300 local, state, and regional Affiliates, and a growing global alliance of like-minded organizations.

Membership is open to all individuals who share a desire to serve and act on behalf of the needs and rights of all young children.

NAEYC Accreditation means that the program meets NAEYC's 10 standards of excellence in early childhood education. Programs that meet these standards provide a safe and healthy environment for children, have teachers who are well-trained, have access to excellent teaching materials and work with curriculum that is appropriately challenging and developmentally sound. These programs are continuously improving themselves to provide the best possible educational opportunities for children.

The GRCC Lab Preschool's accreditation is valid through October 2021. For more information on the accreditation process and criteria, please talk to the director or visit www.naeyc.org.

State of Michigan Early Childhood Standards of Quality

The Michigan Early Childhood Standards of Quality define early childhood settings of the highest quality. To learn more or to view the standards, visit www.michigan.gov/gsrp

Great Start to Quality Initiative

GRCC Laboratory Preschool is proud to be part of the Great Start to Quality. To learn more visit www.greatstartconnect.org.

LIBRARIES

Family Resource Library

Located in the hallway outside of the infant and toddler classrooms is a family resource library. These resources are available for families to borrow.

On the shelf on top of the resource library there is a lending library of adult books. Please feel free to take one and return when you are finished.

Family/Child Lending Libraries

An infant/toddler lending library is located in the hallway outside of the infant and toddler classrooms.

Please take a few moments to look at and make use of all the resources available to you and your family.

NEWSLETTERS

Your child's classroom teacher(s) will provide a monthly informational newsletter. Also, a center-wide newsletter is distributed monthly. If you would prefer these newsletters in a language other than English, please speak with your child's teacher.

COMMUNITY RESOURCES FOR FAMILIES

We are incredibly fortunate to live in a community that is very rich in resources for our families.

Child and Family Resource Council have an excellent online Community Resource guide that can be found at: www.childresources.cc

United Way of West Michigan has many programs that support families in our community. They can be found at: www.waybetterunitedway.org

Grand Rapids Children's Museum located in downtown Grand Rapids offers many family-friendly events. More information can be found at: www.grcm.org

Kent District Libraries are found all throughout Kent County. They have many free family events. Please visit their website to learn more: www.kdl.org

THE PROJECT APPROACH

Children have a strong disposition to explore and discover. The Project Approach builds on natural curiosity, enabling children to interact, question, connect, problem-solve, communicate, reflect, and more. This kind of authentic learning extends beyond the classroom to each student's home, community, nation, and the world. It essentially makes learning the knowledge of real life and children active participants in and shapers of their worlds.

For more information about The Project Approach, visit www.projectapproach.org

COMMON INFECTIONS IN CHILD CARE

The following table summarizes common infections found in children. They include bacteria, viruses, and parasites. If your child has one of these infections, use this table as a guide for when to keep him/her home from childcare.

Acute	the sudden onset or short initial period of an illness
Asymptomatic	no symptoms
Case	the person who is sick or infected
Contact	a person who has come in contact with the sick or infected case
Exclude	keep your child home
Incubation period	how soon the symptoms of an illness appear after being exposed to the infected person or material
Lesion	open area of the skin where germs and organisms can either enter or ooze out

INFECTION	MODES OF TRANSMISSION	INCUBATION PERIOD	CASE	CONTACT
Campylobacter enteritis	Contaminated food or water; Under-cooked chicken or pork; Feces	Usually 2-5 days with a range of 1-10 days	Exclude until 48 hours after treatment initiated or until asymptomatic, whichever is shorter.	No exclusion required.
Chickenpox	Infected lesions; Respiratory secretions; Airborne spread	Usually 14-16 days with a range of 10-21 days	Exclude until lesions are dry and crusted. Usually 5 days in unimmunized children or 1-4 days in previously immunized children.	Exclude immunosuppressed children during outbreak.
Conjunctivitis (pinkeye)	Discharge from the eye; Respiratory secretions	24-72 hours	Exclude until 24 hours after treatment initiated.	No exclusion required.
E. coli 0157:H7	Feces; Contaminated food; Under-cooked beef	Usually 3-4 days with a range of 1-8 days	Exclude until 2 successive negative stool samples, 48 hours after last dose of antimicrobials or until 10 days after symptoms end.	No exclusion required unless symptomatic.
Fifth Disease	Respiratory secretions	Usually 4-14 days with a range of 4-21 days	No exclusion required.	No exclusion required.
German Measles (Rubella)	Respiratory secretions; Direct contact; Droplet spread	Usually 14-17 days with a range of 12-23 days	Exclude until 7 days after onset of rash.	Those who are pregnant and not immunized should seek medical advice.
Giardia Lamblia	Feces Contaminated food or water	Usually 3-25 days or longer	Exclude until asymptomatic.	No exclusion required.
Haemophilus Influenza	Respiratory secretions	Unknown, possibly 2-14 days	Exclude during acute illness and until treated.	Seek physician's advice concerning prophylaxis.
Hand-foot-mouth Disease	Feces; Respiratory secretions	3-6 days	No exclusion required.	No exclusion required.
Hepatitis A	Feces	Usually 25-30 days with a range of 15-50 days	Exclude until 7 days after onset of illness.	Prophylaxis should be considered for staff and children.
Hepatitis B	Primarily blood	Usually 45-180 days with a range of 2 weeks to 6-9 months.	No exclusions required. If child has behavioral (eg. biting) or medical (eg. blood condition) risk factors, consult a physician.	No exclusion required.
Herpes Simplex Virus	Infected secretions	3-5 days	Exclude until skin lesions are dry and crusted.	No exclusion required.
Impetigo	Lesion secretions	Variable and indefinite, usually 4-10 days	Exclude until 24 hours after treatment initiated.	No exclusion required.
Influenza	Respiratory secretions; Airborne spread	1-3 days	Exclude until able to tolerate general activity.	No exclusion required.

(Common Infections in Child Care *continued*)

INFECTION	MODES OF TRANSMISSION	INCUBATION PERIOD	CASE	CONTACT
Lice	Infested area	Approximately 7-10 days after eggs hatch	Exclude until treated.	Examine for infestation and seek treatment if needed.
Measles	Respiratory secretions	Usually 10-12 days with a range of 7-21 days	Exclude until 4 days after onset of rash.	Exclude immediately if symptoms begin and consult a doctor.
Meningitis Bacteria (Neisseria Meningitis, Streptococcus Pneumoniae)	Respiratory secretions	Usually 3-4 days with a range of 2-10 days	Exclude during acute illness and until treated.	Seek physician's advice concerning prophylaxis. Dependant on type of Bacteria.
Meningitis Viral (Aseptic)	Varies	Varies	No exclusion required.	No exclusion required.
Mononucleosis Infectious	Saliva; Contaminated toys or objects	Usually 30-50 days	Exclude until able to tolerate general activity.	No exclusion required.
Mumps	Respiratory secretions; Airborne spread	Usually 15-18 days with a range of 12-25 days	Exclude until 9 days from onset of parotid gland swelling, less if swelling subsides.	Susceptible contacts should seek physician's advice.
Sore throat Nonspecific	Respiratory secretions	12-72 hours	Exclude only if child has fever or is unable to participate in general activities.	No exclusion required.
Sore throat Streptococcal	Respiratory secretions; Direct contact	1-4 days	Exclude until 24 hours after treatment is initiated.	No exclusion required.
Pinworms	Feces; Contaminated objects, clothing, house dust, etc.	2 weeks-2 months	Exclude until treated.	No exclusion required.
Respiratory iInfections (upper respiratory infections, colds, bronchitis)	Respiratory secretions	12-72 hours	Exclude only if child has fever or is unable to participate in general activities.	No Exclusion required.
Roseola	Probably Respiratory secretions	Usually 10 days with a range of 5-15 days	Exclude until rash has disappeared.	No exclusion required.
Rotavirus	Feces; Respiratory secretions	24-72 hours	Exclude until asymptomatic.	No exclusion required.
Salmonellosis	Feces; Contaminated food; Raw and under-cooked eggs and egg products.	Usually 12-36 hours with a range of 6-72 hours	Exclude until diarrhea ceases.	No exclusions required unless symptomatic.
Scabies	Infested areas	2-6 weeks; 1-4 days after re-exposure	Exclude until 24 hours after treatment initiated.	Direct inspection of body.
Scarlet Fever	Respiratory secretions	1-4 days	Exclude until 24 hours after treatment initiated.	No exclusion required.
Shigellosis	Feces	Usually 1-3 days with a range of 1-7 days	Exclude until 2 negative successive stool samples or after completion of 5 days of antibiotics.	Exclusion not required.
Tuberculosis	Respiratory secretions; Airborne spread	2-10 weeks	Exclude until physician advises return.	Seek physician's advice concerning prophylaxis.
Whooping Cough (pertussis)	Respiratory secretions	Usually 7-10 days with a range of 6-21 days	Exclude until 5 days after treatment initiated.	Seek physician's advice concerning prophylaxis.

REFERENCES:

Donowitz, Leigh G. *Infection Control in the Child Care Center and Preschool*. Pennsylvania: Lippincott Williams & Wilkins; (pp. 71-75); 1999.
 Pickering LK, ed. *Red Book: 2003 Report of the Committee on Infectious Diseases*, 26th ed. Elk Grove Village, IL: American Academy of Pediatrics; 2003.
 Kent County Administration, www.accesskent.com. Grand Rapids, MI: County of Kent; 2001-2010.

CLEANING AND SANITIZING EQUIPMENT AND TOYS

Utility gloves and equipment designated for cleaning and sanitizing toilet learning/training equipment and flush toilets shall be used for each cleaning and shall not be used for other cleaning purposes. Utility gloves shall be washed with soapy water and dried after each use.

RATIONALE: Contamination of hands and equipment in a child care room has played a role in the transmission of disease.

AREA	CLEAN	SANITIZE	FREQUENCY
Classrooms/Child Care/Food Areas			
Countertops, tabletops, floors, door cabinet handles	x	x	Daily and when soiled
Food preparation and service surfaces	x	x	Before and after contact with food activity. Between preparation of raw and cooked foods.
Carpets and large area rugs	x		Vacuum daily when children are not present. Clean with a carpet cleaning method approved by the local health authority. Clean carpets only when children will not be present until the carpet is dry. Clean carpets at least monthly in infant areas, at least every three (3) months in other areas and when soiled.
Small rugs	x		Shake outdoors or vacuum daily. Launder weekly.
Utensils, surfaces and toys that go into the mouth or have been in contact with saliva or other body fluids.	x	x	After each child's use, or use disposable, one-time utensils or toys.
<ul style="list-style-type: none"> • Toys that are not contaminated with body fluids. • Dress-up clothes not worn on the head. • Sheets and pillowcases, individual cloth towels (is used). • Combs and hairbrushes, wash cloth and machine-washable cloth toys. <i>(None of these items should be shared among children.)</i>	x		Weekly and when visibly soiled.
Blankets, sleeping, bags, cubbies	x		Monthly and when soiled.
Hats	x		After each child's use or use disposable hats that only one child wears.
Phone receivers	x	x	Weekly.
Hand washing sinks, faucets, surrounding counters, soap dispensers, door knobs	x	x	Daily and when soiled.
Toilet seats, toilet handles, door knobs or cubicle handles, floors	x	x	Daily, or immediately if visibly soiled.
Toilet bowls	x	x	Daily.
Mops and cleaning rags	x	x	Before and after day of use, wash mops and rags in detergent and water, rinse in water, immerse in sanitizing solution, and wring as dry as possible. After cleaning and sanitizing, hang mops and rags to dry.
Waste and diaper containers	x	x	Daily.
Any surface contaminated with body fluids: saliva, mucus, vomit, urine, stool, or blood	x	x	Immediately as specified in STANDARD 3.026

Adapted from *Keeping Healthy*, National Association for the Education of Young Children, 1999.

ADDITIONAL RESOURCES:

American Academy of Pediatrics – www.aap.org
National Association for the Education of Young Children – www.naeyc.org
American Red Cross – www.redcross.org

National Resource Center for Health and Safety in Child Care – nrckids.org
Kent County Health Department – www.accesskent.com

THE WAY CHILDREN LEARN

HOW ARE CHILDREN EQUIPPED TO LEARN?

Senses: By using their sense of sight, hearing, tasting, feeling and smelling, children learn about the objects and people around them.

Muscles: In order for children to feel completely at ease in their world, they must learn complex coordinated muscle skills which help them know more about their bodies and how they operate in space.

Curiosity: Young children find out about their world by poking, peering, pushing, and pulling at the things around them. They also ask endless ‘why’ questions of grown-ups. They take things apart and put them together. They try and fail and try again until they succeed. All of these are ways children learn through curiosity.

Language: Language goes hand-in-hand with curiosity. As children discover things for themselves, they want to describe them, talk about them, and ask questions about them. They want a name for each object they handle. They want to be able to tell other people what they do, how they feel, and what they think.

Organizing Ability: As children grow, they store in their brain the stimuli received through their senses. Human beings develop the ability to organize their experiences into patterns that can be used over and over again in their daily lives. As children’s worlds broaden, they must rearrange their thinking to cover a wider area and to include more experiences and to replace old patterns with new ones. This is the process of growing up.

HOW DO CHILDREN LEARN?

Exploration: This is the way children learn for themselves and about the world. They explore it all with their senses.

Trial and Error: This is how adults, as well as children, must approach new situations. When children approach problems by trial and error, they learn that mistakes are a natural part of learning.

Pleasure: When they are having fun, human beings want to repeat the actions that bring them pleasure. When learning is fun (or enjoyable), children naturally want to keep on learning. Smiles, conversation, and positive feedback from adults are all rewards that spur children on to further learning.

Imitation: Young children learn by copying what grown-ups and other children do. Because imitation is such a strong urge in children, it is essential that young children be able to identify themselves with a grown-up whose standards are high and whose approach to life is worth copying.

Participation: This is the first cousin to learning by imitation. It means joining in the action.

Communication: We live in a world of words. They link us with our environment and give us a means of sorting out the information we receive. Children who have few words to call upon are bewildered in a society that is so geared toward language. Before they can begin to enjoy all the thrill of learning, they must first learn to communicate with their teachers and classmates.

WHAT DO CHILDREN NEED TO KNOW?

Trust in the world: Would you take the word of someone you didn’t trust? Of course not! Neither will children. However, once children feel secure, they are ready to receive new knowledge.

Body awareness: Peoples’ own bodies are their most important possessions. Learning about their bodies through various experiences such as the names for body parts, any opportunities for vigorous use of muscles, and dancing gives children assurances about their bodies and practice in controlling their movements.

Familiar objects: Children need many different experiences to make them familiar with objects around them; i.e. a big block is better at the bottom of the tower; you can’t dig tunnels in dry sand; sugar is sweet and vinegar is sour. These bits of knowledge build children’s stock of information. This information adds detail to children’s understanding of their environment and helps clarify thinking.

People: A wide knowledge of objects is useless if children do not understand their own relationships to people around them. They need to file away all sorts of information about people; names, relationships, expectations, roles.

Time: While taking every opportunity to introduce the words and ideas of time, the adult must keep in mind that children are just beginning to understand time. They may know ‘today,’ but are still confused that ‘tomorrow,’ when it comes, is also ‘today’.

Realistic fear: Fear is born in us to alert us to danger. Sensible fear is nothing to be ashamed of. Children’s fears often grow out of their limited experiences. Adults can help children handle their fears by encouraging them to talk about their fears.

Handle anger: Anger is a natural emotion. Like fear, it needs to be controlled and directed. Adults need to help young children learn this control and direction.

Cope with frustration: Children must face numerous frustrations in the course of a day. They must begin to develop techniques for coping when learning to wait, to accept substitutes, and to develop many interests and activities.

Be Responsible!: Work that is appreciated becomes fun. Even the routine chores of life are bearable, if people have learned to approach responsibilities in a positive manner. The time to develop this attitude toward work is when children are young and naturally want to do grown-up jobs.

Adapted from: *The Ways Children Learn*, Lois B. Murphy, Ph.D. and Ethel M. Leeper. Department of Health, Education, and Welfare, O.C.D., 1970. *Development of Infants and Toddlers*.

Social Interaction

Social interaction takes place from birth. The infant begins to develop attachments with mother, father, and others. Daily care giving, nurturing, and play socialize the infant. The interaction is mutual—both infants and adults initiate and respond to each other. Trust develops when the infant comes to feel that people respond quickly and lovingly to their needs for food or play. These interactions also make the infant

enjoyable and satisfying to adults. The GRCC Lab Preschool supports a primary caregiver relationship for all infants/toddlers.

The development of feelings of attachment, trust, and an interest in play with other people is important for healthy growth. At the toddler stage, the child is beginning to strive for independence. This can be a difficult time for toddlers to relate to others. They need adults to help them play and share, and to support the use of language to express feelings. Toddlers can also be very enjoyable people as they imitate behaviors and show warmth and affection for adults and each other.

Physical Mastery

Infants learn problem-solving through their manipulation of toys and playthings. Their manipulations include reaching, grasping, touching, shaking, taking apart, and tasting. By the toddler stage, the child can manipulate materials such as puzzles and blocks.

The child gains even greater control over his/her body, with abilities that range from holding up the head and rolling over, to sitting, crawling, walking, running, and climbing. The complex physical skills the infant masters require practice and the gentle, enthusiastic support of adults. The adult must decide when to help and when the child must struggle independently.

Sensory Stimulation and Perception

The infant experiences many sensations through feeling of touch, hearing, taste, seeing, and smelling. The infant, with a great number of experiences, becomes able to organize his/her body and mind.

The child's intelligence is developed through these sensory experiences. As infants watch mobiles, hear familiar sounds, mouth toys, and watch objects, they gain information and understanding. Toddlers develop these abilities to the point where they can sort shapes, do puzzles, and remember experiences. Adults help in this process by providing a wide variety of toys and playthings that have distinct sensory qualities.

Emotional Well-Being and Personality

Individual differences in infants are an integral part of their personal growth. Each infant and toddler needs to feel valued and to have the opportunity to grow in his/her own way. Adults must express interest, affection, and concern for each child openly and frequently. Each infant must receive personal support over the course of the day by a familiar and loving adult.

Communication and Language

The process of communication begins even before babbling appears. Infants and their families quickly learn to read the moods of each other. Communication and language are important to all areas of development. Infants need to hear the sounds and structure of language. They need their non-verbal gestures to be experiences and model language.

Adapted from Cataldo, Christine, *Infant and Toddler Programs*. Reading, MA., Addison Wesley Publishing Company. 1983.

THE CLASSROOM ENVIRONMENT: LEARNING THROUGH PLAY

Dramatic Play allows the child to:

- Construct the world as he/she sees it
- Act out feelings and emotions in a comfortable setting
- Role-play real life situations, characters from stories and films
- Practice language and social skills
- Interact with other children in an informal situation

The Puppet Stage encourages children to:

- Identify with character stories
- Tell original stories and retell old favorites
- Speak the part of more than one character by changing the voice and portraying various feelings and moods

Math/Manipulative Area Games serve as a reinforcement center that provides an opportunity for the child to:

- Develop visual discrimination skills and problem-solving skills
- Classify a variety of objects
- Identify relationships between objects
- Learn to reason
- Use a variety of materials for measuring

The Book Area is a relaxing center that allows the child to:

- "Read" pictures
- Browse through books for pleasure
- Learn methods of expressing thoughts and feelings
- Develop personal reading interest

Art provides a medium of expression that enables the child to:

- Work with a variety of materials
- Experience sensory pleasures
- Experiment with color, shape, and texture
- Use visual experience as a means of communication

The Constructive/Block Center helps the child to:

- Enjoy the manipulation of blocks
- Improve small and large muscle coordination
- Learn to share ideas and work together in a group
- Develop concepts such as big/little, more than/less than/ equal to, etc.
- Express creativity

Science simulates the child to:

- Explore and experiment
- Use a variety of material for weighing and measuring
- Develop skills in using the scientific method of problem-solving (observing, identifying problems, predicting, testing the prediction, and generalizing)
- Share discoveries with others
- Find out about nature

Music offers the child a chance to:

- Appreciate different types of music
- Experiment freely with tempo, volume, and pitch
- Use music for self-expression through body movement, singing, playing instruments or composing songs

The Physical Development Area is designed to:

- Aid motor development and coordination
- Provide experiences with climbing equipment, balance beam, ball activities, etc.



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